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			ING PARTS OF Date Granted			
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An oath or dec	claration in complian dication Number and	ce with 37 CFR 1.	63, including resid	lence information an	d identifying the a	pplication b
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1.43 or 1.47.		•				
A properly sign Application No.	ned oath or declarat Imber and Filing Dal	te, is required.	WITH 37 CFH 1.63,	identifying the applic	auon by the abov	المستوانين الم
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FORM PTO-1533 (REV. 9/98)

Customer Service Center

Initial Patent Examination Division (703) 308-1202

Atty. Dkt. No. 70191/239

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Lamer

Title:

PATIENT DATA INFORMATION

**SYSTEM** 

Appl. No.:

09/474,569

Filing Date:

12/29/1999

Examiner:

Unknown

Art Unit:

2773

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CERTIFICATE OF MAILING
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231, on the date below.

Chris Escavaille

(Printed Name)

(Signature)

March 2, 2000

(Date of Deposit)

## TRANSMITTAL OF MISSING PARTS OF PATENT APPLICATION

Assistant Commissioner for Patents Washington, D.C. 20231

Attn: BOX MISSING PARTS

Sir:

In response to the Notice to File Missing Parts of Application mailed on February 11, 2000, in the above-identified application, transmitted herewith are the missing parts needed to complete the filing of the subject patent application.

## Enclosed are:

- [X] Declaration and Power of Attorney (4 pages)
- [X] Copy of Notice to File Missing Parts (Part 2 of Form PTO-1533)
- [X] Recordation Form Cover Sheet (Form PTO-1595)
- [X] Assignment and Agreement (2 pages)
- [ X ] Check in the amount of \$40.00 in payment of the Assignment recordation fee
- [X] Check in the amount of \$1,018.00 in payment of the basic filing fee, the additional claims fee and the surcharge fee (37 C.F.R. § 1.16(e))

The Assistant Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated,

otherwise improper or informal or even entirely missing, the Assistant Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447.

Respectfully submitted,

Date

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